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Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2008

Inspection

epartment of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2008 calendar year, or tax year beginning 09-01-2008 and ending 08-31-2009 D Employer identification number B Check if applicable Please INSTITUTE OF FOOD TECHNOLOGISTS use IRS 36-2136957 Address change label or Doing Business As E Telephone number Name change print or type. See (312) 782-8424 Initial return Specific Number and street (or P O box if mail is not delivered to street address) Room/suite 525 WEST VAN BUREN STREET No 1000 **G Gross receipts** \$ 23,084,659 Instruc-Termination tions. City or town, state or country, and ZIP \pm 4 CHICAGO, IL 606073830 Amended return Application pending Name and address of Principal Officer **H(a)** Is this a group return for BARBARA BYRD KEENAN affiliates? 525 WEST VAN BUREN STREET No 1000 CHICAGO, IL 606073830 H(b) Are all affiliates included? ☐ 4947(a)(1) or ☐ 527 **✓** 501(c) (3) **◄** (insert no) (If "No." attach a list See instructions) Group Exemption Number 🕨 Web site: ► www ift org L Year of Formation 1939 M State of legal domicile IL Part I Summary Briefly describe the organization's mission or most significant activities Activities & Governance See Additional Data Table Check this box ┌ if the organization discontinued its operations or disposed of more than 25% of its assets Number of voting members of the governing body (Part VI, line 1a) . . 16 16 Number of independent voting members of the governing body (Part VI, line 1b) $\,$. 85 Total number of employees (Part V, line 2a) . 1,000 Total number of volunteers (estimate if necessary) . Total gross unrelated business revenue from Part VIII, line 12, column (C) . 1,836,148 Net unrelated business taxable income from Form 990-T, line 34 . -286,552 b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 102,984 150,000 8 9 Program service revenue (Part VIII, line 2g) . . 15,429,362 14,805,233 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 960,589 -1,873,039 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 222,876 137,419 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 16,715,811 13,219,613 146,997 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 125,526 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 6,989,628 Expenses 7,171,990 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b (Total fundraising expenses, Part IX, column (D), line 25 $\frac{0}{2}$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 7,988,987 7,587,089 Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 15,104,141 14,906,076 18 Revenue less expenses Subtract line 18 from line 12 19 1,611,670 -1,686,463 8 % **End of Year** Beginning of Year Assets of Balance 20 Total assets (Part X, line 16) 23,359,789 22,063,130 21 Total liabilities (Part X, line 26) 5,514,015 6,052,893 22 Net assets or fund balances Subtract line 21 from line 20 17,845,774 16,010,237 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge **Please** 2010-07-12 Sign Signature of officer Here Barbara Byrd Keenan CHIEF EXECUTIVE OFFICER Type or print name and title Date Check if Preparer's PTIN (See Gen Inst) Preparer's Gregory S Adams signature Paid empolyed 🕨 🦵 Preparer's Clifton Gunderson LLP Firm's name (or yours if self-employed). **Use Only** address, and ZIP + 4 1301 W 22nd St Ste 1100 Phone no (630) 573-8600 Oak Brook, IL 60523

May the IRS discuss this return with the preparer shown above? (See instructions) .

Cat No 11282Y

Part III Statement of Program Service Accomplishments (See the instructions.)

1	Briefly describe the organization's mission				
See A	dditional Data Table				
2	Did the organization undertake any si	gnıfıcant program s	ervices during the yea	ar which were not listed on	
	the prior Form 990 or 990-EZ? .	on Schodulo O			┌ Yes ┌ No
3	If "Yes," describe these new services Did the organization cease conductin		it changes in how it co	anducts any program	
-	services?	· · · · · ·	· · · · ·	· · · · · ·	┌ Yes ┌ No
	If "Yes," describe these changes on S	chedule O			
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organization others, the total expenses, and reven	ons and 4947(a)(1)	trusts are required to	report the amount of grants	•
4a	(Code) (Expenses \$	3,525,115	ıncludıng grants of \$) (Revenue \$	7,626,470)
	ANNUAL METING AND FOOD EXPO THE INST INDIVIDUALS ON AN ANNUAL BASIS, TOGETHER F AREAS OF FOOD TECHNOLOGY MORE THAN	OR THREE DAYS OF TEC	HNICAL SESSIONS, SYMPO	SIA AND FORUMS DESIGNED TO U	PDATE THEIR AWARENESS IN ALL
4b	(Code) (Expenses \$	3,020,754	ıncludıng grants of \$) (Revenue \$	3,257,189)
4D	PUBLICATIONS AND COMMUNICATIONS FOO coverage includes the latest research develo Science has been the Institute of Food Technof food science Today it publishes more that	D TECHNOLOGY Is the le pments, industry news, nologists' premier science	eading publication addressi consumer product innovati e journal, containing peer-	ng all facets of food science and te ions, and professional opportunities reviewed reports or original researc	chnology Its in-depth and balance Since 1936, the Journal of Food
4c	(Code) (Expenses \$ SCIENCE PROGRAMS Public Policy and Regu food industry, research and consumer food s latest information on safety, defense, labelir Food Technologists provides the latest inform	lations - By focusing on safety, the Institute of Fo ng and marketing, impor	public policy, food laws, a ood Technologists keeps so t/export requirements, and	cience at the center of related decised other food-related concerns Key	sion making You will learn the Science Issues - The Institute of
	(Code) (Expenses \$	2,238,728	ıncludıng grants of \$	146,997) (Revenue \$	3,394,194)
4d	Other program services (Describe i	n Schedule O)			
	(Expenses \$	including grants o	of\$) (Revenue \$)
4e	Total program service expenses \$	10,655,50	08 Must equal Part I	X, Line 25, column (B).	

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νo
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		Νο
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12		No
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24a		N o
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

		1			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
	of U.S. Information Returns . Enter -0- if not applicable	1a	57			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		,	1		
		1b	0			
c	Did the organization comply with backup withholding rules for reportable payments t gaming (gambling) winnings to prize winners?		dors and reportable	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	i .	 I			
	Statements filed for the calendar year ending with or within the year covered by this	2-	٥٠			
h	return	2a	85	1		
U	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more durin			3a	Yes	
h	return?			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a si				103	
	over, a financial account in a foreign country (such as a bank account, securities acaccount)?	count	, or other financial .	4a		Νο
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , <i>Re Financial Accounts</i> .	port o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νo
C	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exemp Tax Shelter Transaction</i> ?	t Entit	ty Regarding Prohibited • • •	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo con more?	trıbut	ion of \$75 or	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services p	rovide	:d?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prope	rty for	which it was required to			
	file Form 8282?			7c		Νο
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d		1		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay	prem	nums on a personal	l _		
e	benefit contract?		anofit contract?	7e 7f		No No
f	For all contributions of qualified intellectual property, did the organization file Form 8			71 7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization fi		·	79		110
	required?			7h		Νo
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a section $\frac{1}{2}$					
	excess business holdings at any time during the	, PO113	og organization, nave	8		
^	year?					
9 a	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966 ?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person			9b		
10	Section 501(c)(7) organizations. Enter	•				
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
	Gross income from members or shareholders					
		11a		1		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
	·		<u> </u>	1		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	r lieu d I	of Form 1041? I	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A	. Governing	Body and	d Management	

			165	140
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body 1a 16			
Ь	Enter the number of voting members that are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
ь	each committee with authority to act on behalf of the governing body?	8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	9a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	Yes	
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Νο

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed IL
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization MARK BARENIE

525 WEST VAN BUREN SUITE 1000 CHICAGO,IL 606073814

(312) 782-8424

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i	·	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

			1			eck all ly)				(5)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustae or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	0	Estima imount o compens from t rganizati relat organiza	f other sation :he on and ed
1b	Total		<u>.</u> .					>	1,100,65	7	0		128,828
1b 2	Total	g those ın 1					re thar	•			0		128,828
	Total number of individuals (includin	g those ın 1					re thar	•			0	Vec	· · ·
	Total number of individuals (includin	g those in 1 ▶11 officer, direc	a) who	recei	ved	mor	employ	n \$1	00,000 in reportab	le	0	Yes	128,828 No
2	Total number of individuals (including compensation from the organization) Did the organization list any former on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedu</i> For any individual listed online 1a, is organization and related organization	g those in 1 11 officer, direct le J for such	a) who	recei ruste <i>ual</i> •	ved e, k	ey e	employ • •	/ee,	or highest compen	sated employee	3		No
3 4	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? <i>If</i> "Yes," complete Schedul For any individual listed online 1a, is organization and related organization individual	g those in 1 11 officer, direct le J for such to the sum of ns greater th	a) who ttor or t individu reporta nan \$15	ruste ual ble c 0,00	ved e, k omp 0? 1	ey e	employ ation 'es," cc	ee, and	or highest compen other compensatio	sated employee n from the		Yes Yes	No
3	Total number of individuals (including compensation from the organization) Did the organization list any former on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedu</i> For any individual listed online 1a, is organization and related organization	g those in 1 11 officer, direct le J for such the sum of ns greater th eive or accre	a) who	ruste ual ble c 0,00	ved e, k omp 0? 1	ey e ens froi	employ ation 'es," cc many	ee, and ompi	or highest compen other compensation lete Schedule J for si	sated employee n from the uch for services	3		No
2 3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	g those in 1 officer, direct le J for such the sum of ins greater th enve or accru the complete s	a) who	ruste ual ble c 0,00	ved e, k omp 0? 1	ey e ens froi	employ ation 'es," cc many	ee, and ompi	or highest compen other compensation lete Schedule J for si	sated employee n from the uch for services	3		No No
2 3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	a) who	ruste val ble c 0,00 censa	e, k omp 0? 1	ey e ens fr "Y fron	employ ation estion estion many erson	s \$1	or highest compen other compensation lete Schedule J for si	sated employee n from the uch for services	3		No No
3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	a) who tor or t individu reporta nan \$15 ue comp Schedule	ruste val ble c 0,00 censa	e, k omp 0? 1	ey e ens fr "Y fron	employ ation estion estion many erson	s \$1	or highest compen or highest compen other compensation lete Schedule J for si other organization other compensation	sated employee n from the uch for services	3		No No
3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	a) who tor or t individu reporta nan \$15 ue comp Schedule	ruste val ble c 0,00 censa	e, k omp 0? 1	ey e ens fr "Y fron	employ ation estion estion many erson	s \$1	or highest compen or highest compen other compensation lete Schedule J for si other organization other compensation	sated employee in from the uch for services re than	3	Yes	No No
3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	a) who tor or t individu reporta nan \$15 ue comp Schedule	ruste val ble c 0,00 censa	e, k omp 0? 1	ey e ens fr "Y fron	employ ation estion estion many erson	s \$1 s 1	or highest compen or highest compen other compensation lete Schedule J for si other organization other compensation	sated employee in from the uch for services re than	3	Yes	No No

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	1a	Federated campaig	ns 1a	ı				,, 0, 0 1 1
# #	ь	Membership dues						
Contributions, gifts, grants and other similar amounts			1b					
ffs,	С	Fundraising events	1c	.=				
1,0 1,0 1,0 1,0 1,0 1,0 1,0 1,0 1,0 1,0	d e	Related organizatio Government grants (cor						
r Sign	f	All other contributions, g	Jifts, grants, and			}	i	
ê Fe		sımılar amounts not ıncl	luded above 1f					
ğ	g	Noncash contribution						
ं ल	h	Total (Add lines 1a			150,000			
				Business Code	-			
e E	2a	ANNUAL MEETING & FO	OD	900,099	7,626,470		114,383	7,512,087
E Re	ь	MEMBER DUES		900,099	, ,	2,781,932	114,303	7,312,007
22	c	ADVERTISING		541,800		2,701,932	1,721,765	
AC 6	d	PUBLICATIONS		511,120		1,535,424	1,721,703	
₹	e	SCIENCE COMMUNICAT	TONE					
Ē	f			541,700	· ·	677,380		
Program Serwoe Revenue	•	All other program s	ervice revenue		462,262	462,262		
Š	g	Total. Add lines 2a- ► \$ 14,805,233	-2f					
	3	Investment income	(including divi	dends, ınterest				
		other sımılar amour	nts)		601,304			601,304
	4	Income from investmen	nt of tax-exempt b	ond proceeds				
	5	Royalties						
	c-	Constants	(ı) Real	(II) Personal				
	6a b	Gross Rents Less rental						
		expenses Rental income						
	С	or (loss)						
	d	Net rental income o	or (loss)					
			Securities	(II) O ther				
	7a	Gross amount from sales of	7,390,703					
		assets other than inventory						
	b	Less cost or other basis and	9,865,046					
	c	sales expenses Gain or (loss)	-2,474,343					
	d	Net gain or (loss)	2,171,313		-2,474,343	-2,474,343		
	8a			. ►				
	oa	Gross income from events (not includir						
<u>•</u>		\$ of contributions rep	orted on line					
듄		1c) See Part IV, lir	ne 18					
Ę,		Attach Schedule G If \$15,000						
<u>-</u>	ь	Less direct expens						
Other Revenue	с	Net income or (loss		ing events				
-	9a	Gross income from						
		activities See part Complete Schedule G	IV, line 19					
		exceeds \$15,000						
	١.		а					
	b	Less direct expens						
	С	Net income or (loss		- LIVILIES				
	10a	Gross sales of inve				Ţ		
		recums and allowan	ces . a					
	b	Less cost of goods	sold b					
	С	Net income or (loss) from sales of	inventory				
		Miscellaneous Rev		Business Code				
	11a	OTHER REVENUES	5	900,099	137,419	137,419		
	b							
	С							
	d	All other revenue _						
	е	Total. Add lines 11a	a-11d	 \$ 137,419				
	12	Total Revenue. Add	l lines 1h, 2g, 3		13,219,613	3,120,074	1,836,148	8,113,391
		8c, 9c, 10c, and 11e .		. •				
	-	,		'		L		Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).								
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	146,997	146,997					
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	1,220,181		1,220,181				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	4,234,649	3,554,202					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	643,698		643,698				
9	Other employee benefits	667,877	20	667,857				
10	Payroll taxes	405,585		405,585				
11	Fees for services (non-employees)							
а	Management	8,071	8,071					
b	Legal	67,390		67,390				
С	Accounting	31,917		31,917				
d	Lobbying							
e	Professional fundraising See Part IV, line 17							
f	Investment management fees							
g	Other	941,214	664,817	276,397				
12	Advertising and promotion	31,823	31,823					
13	Office expenses	1,327,909	1,055,968	271,941				
14	Information technology	361,303	321,533	39,770				
15	Royalties							
16	Occupancy	1,376,341	232,687	1,143,654				
17	Travel	560,808	398,283	162,525				
18	Payments of travel or entertainment expenses for any Federal, state or local public officials							
19	Conferences, conventions and meetings	1,624,254	1,450,830	173,424				
20	Interest							
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	258,803		258,803				
23	Insurance	65,003	31,901	33,102				
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)							
а	CASUAL LABOR	203,467	71,775	131,692				
b	LICENSE FEES	90,708	17,070	73,638				
c	MEMBERSHIP FEES	74,502	23,864	50,638				
d	FRINGE BENEFIT ALLOCATI	262	1,094,052	-1,093,790				
e	OVERHEAD ALLO CATION	-6	1,141,586	-1,141,592				
f	All other expenses	563,320	410,029	153,291				
25	Total functional expenses. Add lines 1 through 24f	14,906,076	10,655,508	4,250,568	(
26	Joint Costs. Check If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation							

Part X	Balance	Sheet

				(A)		(B	-
	1	Cook non interest bearing		Beginning of year 1,421,522	1	End of	808.398
	_	Cash—non-interest-bearing		1,421,522			
	2	Savings and temporary cash investments			3		
	3	Pledges and grants receivable, net		666,908			843,097
	4	Accounts receivable, net		606,906	4		043,097
	5	Receivables from current and former officers, directors, trustees, key employe other related parties <i>Complete Part II of Schedule L</i>			5		
	6	Receivables from other disqualified persons (as defined under section 4958(f) persons described in section 4958(c)(3)(B) Complete Part II of Schedule L .			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
ţ	9	Prepaid expenses and deferred charges		407,376	9		417,313
Assets	10a	Land, buildings, and equipment cost basis	2,049,076				
•	ь		2,040,070				
	D	Less accumulated depreciation Complete Part VI of Schedule D	1,196,379	787,452			852,697
	11	Investments—publicly traded securities		20,076,531	11	1	9,119,508
	12	Investments—other securities See Part IV, line 11 Complete Part VII of Schedule D			12		
	13	Investments—program-related See Part IV, line 11 <i>Complete Part VIII</i> of Schedule D .			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			15		22,117
	16	Total assets. Add lines 1 through 15 (must equal line 34)		23,359,789	16	2	2,063,130
	17	Accounts payable and accrued expenses .		1,680,604	17		1,772,112
	18	Grants payable			18		
	19	Deferred revenue		3,317,354	19		3,809,241
	20	Tax-exempt bond liabilities			20		
S.	21	Escrow account liability Complete Part IV of Schedule D			21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
<u> </u>		persons Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable			24		
	25	Other liabilities Complete Part X of Schedule D		516,057	25		471,540
	26	Total liabilities. Add lines 17 through 25		5,514,015	26		6,052,893
— Ф		Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.					
Balance	27	Unrestricted net assets		17,845,774	27	1	6,010,237
<u>원</u>	28	Temporarily restricted net assets			28		
	29	Permanently restricted net assets			29		
Fund		Organizations that do not follow SFAS 117, check here ▶ ┌ and complete					
ō	20	lines 30 through 34.			_,		
쑮	30	Capital stock or trust principal, or current funds			30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund	•		31		
	32	Retained earnings, endowment, accumulated income, or other funds		47.045.77.4	32		6.040.007
Ř	33	Total net assets or fund balances		17,845,774			6,010,237
	34	Total liabilities and net assets/fund balances		23,359,789	34	2	2,063,130
Рa	rt XI	Financial Statements and Reporting					
	-	aa. etatemente ana neporting				V	N-
		ounting method used to prepare the Form 990	de e co			Yes	No

Dart VI	Einancial	Statements	and Reporting
<i>J.</i> 1 a 	- Financiai	Statements	and keporting

	_		
1	Accounting method used to prepare the Form 990		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b	Were the organization's financial statements audited by an independent accountant?	2b	Νo
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	No
b	If "Yes," did the organization undergo the required audit or audits?	3b	

Employer identification number

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

INSTIT	UTE OF	FOOD TECHN	OLOGISTS					26	212605	7		
Dai	rt I	Peason	for Public C	harity Status (to be co	mnleted	hy all or	nanizatio		-213695 Instruct			
				ation because it is (Please					moduce	10113)		
1				nurches, or association of ch					A)(i).			
2	Ė	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	į.	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)										
4	Ė	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the										
	•	hospital's name, city, and state										
5	Г	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
	·	Section 170(b)(1)(A)(iv). (Complete Part II)										
6	Γ			overnment or governmental	unıt descr	ıbed ın Se	ction 170	(b)(1)(A)	(v).			
7		•	-	ally receives a substantial p						n the gene	eral public	
		described i	n Section 170(l	o)(1)(A)(vi) (Complete Par	tII)		_			_	·	
8	Γ	A communi	ty trust describ	oed in Section 170(b)(1)(A)	(vi) (Com	plete Par	tII)					
9	<u> </u>	An organiza	ation that norm	ally receives (1) more than	331/3% o	f its supp	ort from co	ntribution	ıs, membe	rship fees	, and gross	
		receipts fro	m activities re	lated to its exempt functions	-subject	to certair	nexceptio	ns, and (2) no more	than 331/	'3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	income (l	ess sectio	on 511 tax	() from bu	sınesses	
		acquired by	the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509((a)(4). (S	ee instruc	tions)	
11	Γ		•	and operated exclusively fo		, ,			,	•		
				orted organizations describe						Section 5	09(a)(3). Check	
		a T		type of supporting organiza			nally Integ		'' d	Type	III - Other	
e	Г			rtify that the organization is			-			, ,,		
	·	•		agers and other than one or			•			•	· ·	
_		section 50										
f		check this		d a written determination fro	m the IKS	tnat it is	a Type I,	Type II o	r i ype iii	supportir	ng organization,	
g				as the organization accepted	d any gift	or contrib	utıon from	any of the	!		'	
		following pe										
			·-	r indirectly controls, either a		_	th persons	describe	d ın (ıı)		Yes No	
			· -	ng body of the the supported	_	tion?				11g		
			•	erson described in (i) above		_				11g(
				ty of a person described in (11g(iii)	
h		Provide the	following infori	mation about the organizatio	ns the org	janization	supports					
	(i) Nis	ame of	(ii) EIN	(iii) Type of organization	/iv/\ ī	s the	(v) Did y	ou potific	/v:\ 1	s the	(vii) A mount of	
		orted	(II) LIN	(described on lines 1-9		ation in	the orga			ation in	support?	
1		ıızatıon		above or IRC section	col (i)		ın col (i) of your	col (i) c	rganızed	''	
				(See Instructions))		verning	supp	ort?	ın the	US?		
					docur		1.0				1	
					Yes	No	Yes	No	Yes	No		
							-					

Total

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	ction A. Public Support	ed the box of	i iiile 9 01 Part	. 1.)				
	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(0)	2008	(f) Total
	Gifts, grants, contributions, and	(a) 2004	(b) 2005	(6) 2000	(a) 2007	(e)	2008	(I) I Otal
1	membership fees received (Do not	98,911	290,309	286,397	258,955		150,000	1,084,572
_	include any "unusual grants ")							
2	Gross receipts from admissions, merchandise sold or services performed,							
	or facilities furnished in any activity that	13,684,914	12,249,417	13,111,553	13,584,482	:	14,805,233	67,435,599
	is related to the organization's tax-	, ,	, ,	, ,	, ,		, , , l	, ,
	exempt purpose							
3	Gross receipts from activities that are							
_	not an unrelated trade or business under							
	section 513							
4	Tax revenues levied for the							
	organization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the							
_	organization without charge Total Add lines 1-5	13,783,825	12,539,726	13,397,950	13,843,437		14,955,233	68,520,171
6		13,763,623	12,339,720	13,397,930	13,643,437	-	14,933,233	00,320,171
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons							
	A mounts included on lines 2 and 3							
D	received from other than disqualified							
	persons that exceed the greater of 1% of							
	the total of lines 9, 10c, 11, and 12 for							
	the year or \$5,000							
С	Total of lines 7a and 7b							
8	Public Support (Substract line 7c from							60 500 171
_	line 6)							68,520,171
Τo	tal Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
9	A mounts from line 6	13,783,825	12,539,726	13,397,950	13,843,437	:	14,955,233	68,520,171
10a	Gross income from interest, dividends,							
	payments received on securities loans,	362,310	512,980	486,486	548,363		601,304	2,511,443
	rents, royalties and income from similar	332,313	312,300	.55, .55	3.0,000		301,30	2,011,
	sources							
b	Unrelated business taxable income (less	117 146	246 240	402.607	240.602		206 552	1 474 207
	section 511 taxes) from businesses	-117,146	-346,319	-483,607	-240,683		-286,552	-1,474,307
	acquired after 30 June, 1975	245 164	166,661	2.070	307,680		314,752	1 027 126
С	Add lines 10a and 10b	245,164	100,001	2,879	307,680		314,752	1,037,136
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly carried on							
12	Other income Do not include gain or loss							
12	from the sale of capital assets	17,110	16,025	50,234	72,045		137,419	292,833
	(Explain in Part IV)		·		•			•
13	Total Support (Add lines 9, 10c, 11 and 12)							69,850,140
14	First Five Years If the Form 990 is for the o	rganization's fir	st second third	fourth or fifth t	tay vear as a 50	11(c)(3) organiza	ation
	check this box and stop here	rgamzation 3 m.	st, second, tima	, iouren, or men	iax year as a si	J I (C)(o) organizi	#CION, ▶□
								- ,
Co	mputation of Public Support Perce	ntage						
15	Public Support Percentage for 2008 (line 8		ed by line 13 co	lumn (f))		15		98 100 %
16	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, lıne 27g			16		98 390 %
							<u>I</u>	
Co	mputation of Investment Income	Percentage						

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))

Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h 18

17 1 480 % 3 500 % 18

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

▶▼

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

For Paperwork Reduction Act Notice, see the Intructions for Form 990

OMB No 1545-0047

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Schedule D (Form 990) 2008

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Name of the organization **Employer identification number** INSTITUTE OF FOOD TECHNOLOGISTS 36-2136957

Pa	organizations Maintaining Donor Action organization answered "Yes" to Form 99		unds or Accounts. Complete if the
	organization answered Tes to Form 55	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	efit of the donor or donor advisor or other	☐ Yes ☐ No
Par	t II Conservation Easements. Complete	ıf the organızatıon answered "Yes" to	o Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space	on or pleasure) Γ Preservation of an	historically importantly land area rtified historic structure
2	Complete lines 2a-2d if the organization held a quali on the last day of the tax year	fied conservation contribution in the form	
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easement		2b
с	Number of conservation easements on a certified hi		2c
d	Number of conservation easements included in (c) a	•	2d
3	Number of conservation easements modified, transfe the taxable year ►	rred, released, extinguished, or terminate	d by the organization during
4	Number of states where property subject to conserva	ation easement is located ►	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ations, and Yes No
6	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easements during the	year ►
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease.	he footnote to the organization's financial nents	statements that describes
Par	Organizations Maintaining Collectio Complete if the organization answered '	Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	oublic exhibition, education, or research ii	
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		or financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
ь	Assets included in Form 990, Part X		► \$

Cat No 52283D

3	Organizations Maintaining Col							
	Using the organization's accession and other items (check all that apply)	records, check any of th	ne fol	lowing that are	e a sıgnıfıcant us	e of its collection		
а	Public exhibition	d	Γ	Loan or exch	ange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's co Part XIV	lections and explain ho	w the	y further the o	rganızatıon's exe	empt purpose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to					lar 🕝 🕻	es 「	No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an am				nızatıon answe	ered "Yes" to Fo	rm 990	,
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other intermediary	forc	ontributions o	r other assets n	ot $ abla_{ m v}$	es 「	No
b	If "Yes," explain why in Part XIV and complet	e the following table						
						A moui	nt	
c	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f		_	
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21?	•			Γı	'es	No
	If "Yes," explain the arrangement in Part XIV			1 H57 P		* 1.4.1.4.7		
Pa	rt V Endowment Funds. Complete If)Prior				Four Years	Back
1a	Beginning of year balance	(a) Curient Tear (b	JEHOL	rear (c) i w	rears back (u)	illee rears back (e)	our rears	- Dack
ь	Contributions	-						
c	Investment earnings or losses							
d	Grants or scholarships							
e	Other expenditures for facilities							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year							
_	i lottud the obtilitated percentage of the feat	end halance held as						
а	Board designated or guasi-endowment	end balance held as						
a b	Board designated or quasi-endowment	end balance held as						
b	Permanent endowment 🕨	end balance held as						
b c	Permanent endowment ► Term endowment ►		that :	are held and a	dministered for t	he		
b c	Permanent endowment 🕨		thata	are held and a	dmınıstered for t	he	Yes N	
b c	Permanent endowment Term endowment Are there endowment funds not in the posses	sion of the organization	that a	are held and a	dmınıstered for t	he 3a(i)	Yes N	lo_
b c	Permanent endowment F Term endowment F Are there endowment funds not in the posses organization by	sion of the organization			dmınıstered for t		Yes N	lo
b c 3a	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Sched	 ule R?	dmınıstered for t	3a(i)	Yes N	ło
ь с За ь	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Sched ent fu	 ule R?		3a(i) 3a(ii)	Yes N	do
ь с За ь	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Sched ent fu	 ule R?		3a(i) 3a(ii)	Yes N	lo
ь с За Ь 4	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Schedent fu	 ule R?		3a(i) 3a(ii)	Yes N	
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Schedent fu	ule R?	rt X, line 10.	3a(i) 3a(ii) 3b		
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Schedent fu	ule R?	rt X, line 10.	3a(i) 3a(ii) 3b		
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Schedent fu	ule R?	rt X, line 10.	3a(i) 3a(ii) 3b	(d) Book	value
b c 3a b 4 Par	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Schedent fu	ule R?	rt X, line 10. (b)Cost or other basis (other)	3a(i) 3a(ii) 3b (c) Depreciation	(d) Book	
b c 3a b 4 Par 1a b c d e	Permanent endowment Term endowment Are there endowment funds not in the posses organization by (i) unrelated organizations	sion of the organization	Schedent fu	ule R?	rt X, line 10. (b)Cost or other basis (other) 359,057 1,690,019	(c) Depreciation	(d) Book	value

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2	
(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶			
Part VIII Investments—Program Related. Se	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation year market value
		Cost of end-of-	year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13) Francisco Part IX	l		
(a) Descri			(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)		
Part X Other Liabilities. See Form 990, Part X	K, line 25.		
(a) Description of Liability	(b) A mount		
Federal Income Taxes			
DEFERRED RENT OBLIGATION	471,540		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	471,540		

Par	t XI Reconciliation of C	hange in Net Assets from Forr	<u>n 990 to Financial State</u>	ments	
1	Total revenue (Form 990, Part			1	
2	Total expenses (Form 990, Par	t IX, column (A), line 25)		2	
3	Excess or (deficit) for the year	Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) o	n investments		4	
5	Donated services and use of fa	cilities		5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lir	nes 4 - 8		9	
10	Excess or (deficit) for the year	per financial statements Combine lines	s 3 and 9	10	
Part		evenue per Audited Financial		ue per Return	
1	Total revenue, gains, and othe	r support per audited financial stateme	nts	1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12			
а	Net unrealized gains on invest	ments	. 2a		
b	Donated services and use of fa	acılıtıes	. 2b		
c	Recoveries of prior year grants	s	. 2c		
d	Other (Describe in Part XIV)		. 2d		
e	Add lines 2a through 2d .			. 2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.			. 3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1			
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	. 4a		
b	Other (Describe in Part XIV)		4b		
c	Add lines 4a and 4b			. 4c	
5		d 4c. (This should equal Form 990, Par			
		xpenses per Audited Financia			
1		r audited financial statements		. 1	
2		it not on Form 990, Part IX, line 25	1 - 1		
а		acılıtıes			
b			2b		
с		, Part IX, line 25	2c		
d	Other (Describe in Part XIV)		. 2d	 <u> </u>	
e ~	Add lines 2a through 2d			. 2e	
3	Subtract line 2e from line 1 .			. 3	
4		0, Part IX, line 25, but not on line 1:	4-		
a L		uded on Form 990, Part VIII, line 7b		 	
b	Other (Describe in Part XIV) Add lines 4a and 4b		. 4b	4c	
с 5		nd 4c. (This should equal Form 990, Pa	rt I line 10 \	. 5	
	t XIV Supplemental Inf		nt 1, iiiie 16)	. 3	
Com	plete this part to provide the des	scriptions required for Part II, lines 3, 5, Part XII, lines 3, 5, Part XII, lines 2d and 4b, and Part XI		4, Part XIV, lines 1b and	2b,
	Ident if ier	Return Reference	Ехр	lanat ion	

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DLN: 93493193006120 OMB No 1545-0047

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Open to Public **Inspection**

Name of the organization						Employer identif	ication number
INSTITUTE OF FOOD TECHNO	OLOGISTS					36-2136957	
Part I General Inform	nation on Gra	nts and Assistanc	e				
the selection criteria used Describe in Part IV the or	d to award the gra rganization's proc	nts or assistance? . . edures for monitoring th	he use of grant funds ın t	he United States	gibility for the grants or ass		
Form 990, Part I Part IV and Scho	V, line 21 for ai edule I-1 if addi	ny recipient that rec tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the or if no one recipient rece	eived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of sec							
organizations					<u> </u>		·

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
A wards	122	146,997			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 IFT Divisions have established policies and procedures on how awards are issued Applicants provide information on accomplishments during the selection process Awards are paid based upon criteria already achieved, therefore, there is no follow up required after funds awarded have been disbursed

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DLN: 93493193006120

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

2008

Compensated Employees

Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

For certain Officers, Directors, Trustees, Key Employees, and Highest

Open to Public Inspection

Name of the organization INSTITUTE OF FOOD TECHNOLOGISTS **Employer identification number**

36-2136957

Рa	Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a wi provision of all the expenses described above? If "N			1b		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		·			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	 ~	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VII	I, Section A, line 1a			
а	Receive a severance payment or change of control p	ayment	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	ntal non	iqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," o	,	• • • • • • • • • • • • • • • • • • • •	7		Νo
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III					Na

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & (iii) Other compensation		compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
BARBARA BYRD KEENAN	(I) (II)	364,075			25,000		389,075	242,717	
Mark Barenie	(ı) (ıı)	148,430					148,430	98,953	
Jerry Bowman	(I) (II)	168,650					168,650	112,433	
Marc Bernstein	(I) (II)	149,343					149,343	99,562	
Heidi Voorhees	(I) (II)	147,866					147,866	98,577	
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	Part I, Line 4a	The organization is in the process of arranging a supplemental nonqualified retirement plan for its Chief Executive Officer. An agreement has been developed but is not yet finalized and adopted. The organization has set aside \$25,000 to deposit into the plan upon adoption

Schedule J (Form 990) 2008

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SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

DLN: 93493193006120

Open to Public Inspection

Employer identification number

Name of the organization
INSTITUTE OF FOOD TECHNOLOGISTS

36-2136957

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	OTHER PROGRAM SERVICES INCLUDE MEMBERSHIP EXPERIENCES, KNOWLEDGE AND LEARNING OPPORTUNITIES, AND SUPPORT OF THE IFT FOUNDATION Expenses \$ 2238728 including grants of \$ 146997 Revenue \$ 3394194

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		The Institute of Food Technologists consists of members of a professional organization

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The members of the Institute of Food Technologists participate in an annual nominations and elections process to determine the organizations members of the governing body

lden	ntifier	Return Reference	Explanation
	0, Part VI, A, line 10		The Institute of Food Technologists' governing body has designated the Board Treasurer as the individual responsible for review ing the Form 990 on the Board's behalf prior to filing. The Form 990 will also be review ed by the organization's Chief Executive Officer and Chief Financial Officer prior to filing.

ldentifier	Return Reference Explanation										
Form 990, Part VI, Section B, line 12c		The Institute of Food Technologists' Board of Directors receives a policy manual on an annual basis which includes the conflict of interest policy. Each member acknowledges receipt of the policy on a form which also contains a statement that the officer or director will comply with the policy and is currently unaware of any transaction in which he or she is involved in which would constitute a conflict of interest as defined. Should such a transaction arise, the officer or director will notify the Board or Executive Vice President of the circumstances and act in accordance with the policy with respect to that transaction.									

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The compensation of the Institute of Food Technologists' Chief Executive Officer was determined upon hire by the Board of Directors and documented in an employment contract Subsequently on an annual basis, compensation changes are determined by the Office of the President Compensation of other employees is determined on an annual basis by the Chief Executive Officer The Chief Human Resources Officer performs a salary survery at that time to ensure compensation is within a reasonable range when compared to the market

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		Documents are made available to the public upon request at the Institute of Food Technologists' headquarters

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Documents are made available to the public upon request at the Institute of Food Technologists' headquarters

ldentifier	Return Reference	Explanation
Form 990, Part XI, Line 2		The financial statements of the institute of Food Technologists are included in the audit of the consolidated financial statements of the institute of Food Technologists and institute of Food Technologists Foundation

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

DLN: 93493193006120

2008

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2008

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

INSTITUTE OF FOOD TECHNOLOGISTS

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. See separate instructions.

Related Organizations and Unrelated Partnerships

36-2136957 Part I Identification of Disregarded Entities (B) (C) Name, address, and EIN of disregarded entity Legal domicile (state Direct controlling Primary activity Total income End-of-year assets or foreign country) entity **Identification of Related Tax-Exempt Organizations** Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Primary activity Direct controlling (if section 501(c)(3)) or foreign country) entity Institute of Food Technologists Foundation Community of donors 525 West Van Buren Street committed to the vision of ΙL 501(c)3 Chicago, IL60607 safe and abundant food 36-3432464

Cat No 50135Y

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V Transactions with R	Related Organizations
----------------------------	-----------------------

Part V Transactions with Related Organizations				
Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with	one or more related organizations listed in Parts II-I\	/?		
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No
b Gift, grant, or capital contribution to other organization(s)		1b		No
c Gift, grant, or capital contribution from other organization(s)		1c	Yes	•
d Loans or loan guarantees to or for other organization(s)		1d		No
e Loans or loan guarantees by other organization(s)		1e		No
f Sale of assets to other organization(s)		1f		No
g Purchase of assets from other organization(s)		19		No
h Exchange of assets		1h		No
i Lease of facilities, equipment, or other assets to other organization(s)		1i		No
j Lease of facilities, equipment, or other assets from other organization(s)		1j		No
k Performance of services or membership or fundraising solicitations for other organizati	ion(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization	on(s)	11		No
m Sharing of facilities, equipment, mailing lists, or other assets		1n	1 Yes	;
n Sharing of paid employees		1n	Yes	1
• Reimbursement paid to other organization for expenses		10	+	No
p Reimbursement paid by other organization for expenses		1р		No
q Other transfer of cash or property to other organization(s)		1q		No
r Other transfer of cash or property from other organization(s)		1r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who r	must complete this line, including covered relationship	os and transaction thresholds		
(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved		
(1) Institute of Food Technologists Foundation	C		150,0	00

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	Institute of Food Technologists Foundation	С	150,000
(2)	Institute of Food Technologists Foundation (Amount also includes Type N)	М	400,000
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1		r J
			Yes	No		Yes	No		Yes	No
			•			•	•	Sabadula	D / Form	000) 2000

Software ID: Software Version:

EIN: 36-2136957

Name: INSTITUTE OF FOOD TECHNOLOGISTS

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa												
		Posit ti	(C non (hat a	chec		I			(E)	(F) Estimated amount of other compensation from the organization and related organizations		
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)			
DR SHERI M SCHELLHAASS , PRESIDENT of the Board	2 00	Х		х				0	0	0		
MARIANNE H GILLETTE , PRESIDENT- ELECT of the B	2 00	Х		х				0	0	0		
DR JOHN D FLOROS , IMMEDIATE PAST PRES of	2 00	Х		х				0	0	0		
DR BRUCE R STILLINGS , TREASURER of the Board	2 00	Х		х				0	0	0		
DR DOUGLAS L ARCHER , DIRECTOR	2 00	Χ						0	0	0		
PATRICIA M ARON , DIRECTOR	2 00	Х						0	0	0		
DR BARBARA BLAKISTONE , DIRECTOR	2 00	Х						0	0	0		
DR ROGER A CLEMENS , DIRECTOR	2 00	Х						0	0	0		
DR JANET E COLLINS , DIRECTOR	2 00	Х						0	0	0		
DR BRIAN E FARKAS , DIRECTOR	2 00	Х						0	0	0		
DR JOHN W FINLEY , DIRECTOR	2 00	Х						0	0	0		
DR RUSSELL S FLOWERS , DIRECTOR	2 00	Х						0	0	0		
MORIA MCGRATH , DIRECTOR	2 00	Χ						0	0	0		
JULIA LINK RUDER , DIRECTOR	2 00	Х						0	0	0		
JOHN RUFF , DIRECTOR	2 00	X						0	0	0		
KELSEY N RYAN , DIRECTOR	2 00	Х						0		0		
DR JUAN L SILVA , DIRECTOR	2 00	X						0				
DR DENISE M SMITH , DIRECTOR	2 00	Х						0				
DR JONATHAN A MERKLE, DIRECTOR	2 00	X						0				
YIFAT R YANIV , DIRECTOR	2 00	X						0	0	0		
BARBARA BYRD KEENAN , EXECUTIVE VICE PRESIDENT	40 00			Х		х		364,075	0	,		
Mark Barenie , Chief Financial Officer	40 00			Х		Х		148,430				
Kelly Ahuja , Chief Human Resources Of	40 00			Х				122,293	0	15,801		
Jerry Bowman , VP Communications/Media	40 00					Х		168,650	0	22,943		
Marc Bernstein , VP of Information Techno	40 00					х		149,343		,		
Heidi Voorhees , VP Meetings and Events	40 00					Х		147,866	0	19,953		

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a ANNUAL MEETING & FOOD	900,099	7,626,470		114,383	7,512,087
b MEMBER DUES	900,099	2,781,932	2,781,932		
c ADVERTISING	541,800	1,721,765		1,721,765	
d PUBLICATIONS	511,120	1,535,424	1,535,424		
e SCIENCE COMMUNICATIONS	541,700	677,380	677,380		

Form 990, Part I, Line 1 - Briefly describe the Organization's mission or most significant activities:

The Institute of Food Technologists exists to advance the science of food. Our long-range vision is to ensure a safe and abundant food supply contributing to healthier people everywhere. The Institute of Food Technologists strives to provide an inclusive and welcoming community for all food science and technology professionals and the knowledge and tools they need to enhance their professional compentency.

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

As an organization, the Institute of Food Technologists is focusing its work in four main areas, or "roles and goals." Each is wide-reaching and helps to advance our mission. Steward for the profession and its community - Provide learning, networking and leadership development experiences that enable food science and technology professionals to become leaders in the global food science community. Research Champion and Innovation Catalyst - Champion emerging sciences and foster technology development, application and transfer to increase funding for food-related research and to support innovation in food science. Influential Advocate and Trusted Spokesorganization - Engage in advocacy and communication efforts that enhance recognition of the profession and result in increased understanding and application of the science of food. Global citizen and partner - Proactively contribute to, and be a partner for, the global advancement and application of the science of food.